Meeting Summary Worker's Compensation Advisory Committee -Subcommittee on Health Care Dec. 8, 2008

Participants:

Labor: Karen Gude, Owen Linch, Ed Wood, (John Aslakson-absent)

Business: Beverly Simmons, Pat Nielson, and Christina Lombardi, (Carolyn Logue-absent)

BIIA: Tom Egan

L&I: Roy Plaeger-Brockway, Gary Franklin, Bob Mootz

Facilitator: Dave Overby

Resources and Guests:

Tom Wickizer - UW

Pat Vincent, Karen Nilson, - Renton COHE, Dan Hansen - Ea. WA COHE

Dianna Chamblin, Marti Bradley – The Everett Clinic,

Jordan Firestone, Rachel Fischer - Harborview

Susan Campbell, Kim Arakawa, Chuck Hitchings, Karen Ahrens – L&I

Introduction and Review of Minutes:

Dr. Gary Franklin welcomed the group and opened the meeting. Minutes from Sept 5, 2008 were approved with one modification.

COHE updates.

Renton COHE – presentation by Pat Vincent.

E WA COHE – presentation by Dan Hansen

The Everett Clinic – presentation by Dianna Chamblin

Harborview – presentation by Jordan Firestone

Overview of Proposal for COHE future:

Spreading Occupational Health Best Practices

Susan Campbell presented an overview of the document with specific emphasis on transition goals. This proposal was shared prior to this meeting with two representatives from business and two representatives from labor. Highlight of the transition goals include 1) ending the COHE pilot; 2) Bringing transition plan to WCAC parent committee in two meetings: background and results of COHE project and transition plan for future of COHE; 3) 2009-2011 continue with existing four COHEs under contract; 4) standards and criteria developed for COHEs; 5) 2011-2013 at least two new COHE sites; 6) Some best practices statewide by 2011.

Questions

- A business representative asked a process question. How is L&I attempting to revamp the workers' compensation system through quality improvement efforts?
 - o Is COHE a piece of a comprehensive quality improvement process?
 - How will L&I integrate all of its quality improvement efforts? (E.g. IME improvement, ERTW, COHE, etc.)

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- A labor representative commented that involvement at the executive level helps avoid duplication at L&I.
 - Voice of the stakeholders adds to the success of any QI effort.
- Have medical providers perceptions about working with L&I improved because of COHE?
 - o Specifically, COHE encourages a partnership with L&I
- Business and Labor oversight helped the success of COHE.

Caucus time

Overall Discussion and Questions: The group discussed the proposal section by section starting with the background section *Success of the COHE Project* and the *Transition Goals*. The group agreed to focus on *Transition Goals*. The group did not specifically discuss the last section: *Answers to Key Questions*.

Page 1: Success of the COHE Pilot Project

- In the Providers section, change the wording to show providers are changing behavior.
 - o Address provider organizations as well as individual providers.
 - o Including HSCs in the paragraph is confusing.
 - o Paragraph is about benefits to providers (and they perceive HSCs as a benefit)
 - o Expand this section to include best practices and provider behavior.
- Tell the WCAC how much time will be needed for adequate presentation on COHE success.
 - Likely that background of COHE and COHE success will be presented to the parent committee via slides.
 - o L&I wants WCAC-HC feedback on these slides before this presentation.
- Leave Self Insured employers out of the background discussion of COHE.
- Need to add to the Provider section a discussion of the clinical success of COHE and not just administrative success.
- Business and Labor are comfortable with L&I presenting COHE success to the parent committee.

Page 2: Transition Goals

- #1: Make clear that ending the pilot does not mean ending the COHEs.
 - o Change language to reflect "end the pilot phase of the COHEs"
- #2: Does this bullet refer to WCAC-HC or Business Labor Advisory Boards or both?
 - o It refers to WCAC-HC. Reference to the BLABs is in the *Answers to Key Questions* section, C. bullet #8.
 - Need to put WCAC-HC in bullet #2 to make this clear.
 - o Modify the phrase at the end of this bullet to read "delivering occupational health care and continued over site of the COHEs."
- #3: No change
- #4: Reverse the second and third bullet
- #4: Change the first bullet regarding best practices to "by no later than 2011"
- #4: How will new COHE sites be funded?

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- Need to explain funding plan to parent committee.
- A business representative has a concern that she cannot go back to the business committee until she knows the specifics on COHE funding.
- #4: Add the following as a new first bullet under # 4 to read: "Before continuing COHEs beyond 2011 and implementing additional COHEs, L&I will develop a funding mechanism for COHEs and present it to WCAC."
 - For presentation to the WCAC, include a good explanation regarding impact on the Medical Aid fund and premiums.
- #5: Modify goal #5 to read: "Starting in 2009, work with the self-insurance section of L&I and self-insured employers and their Third Party Administrators (TPAs) to make occupational health best practices available for self-insured programs and workers."
- #6: Modify this bullet to say make occupational health best practices available to all workers and providers.
 - o Realize that not all providers and workers will take advantage of the opportunity.

Next steps-Discussion

The group agreed that approval of *Transition Goals* on page 2 of the proposal for COHE future *Spreading Occupational Health Best Practices*, would likely be approved by this subcommittee with the modifications listed above.

- L&I will make the modifications and send it out to subcommittee members for approval via email.
- No further WCAC-HC meeting is needed prior to presentation to WCAC in April and June 2009 (tentative dates) with approval of above.
- Slides regarding L&I's presentation to WCAC regarding the COHE project and its success will also be sent to subcommittee members for feedback prior to April 2009.